



Please type '+' plus sign (+) inside the



PTO/SB/122 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Assistant Commissioner for Patents Washington, D.C. 20231	Application Number	09/827,451
	Filing Date	April 6, 2001
	First Named Inventor	Robert F. Terry
	Group Art Unit	2133
	Examiner Name	not yet known
	Attorney Docket Number	10007.000110

Please change the Correspondence Address for the above-identified application to:

☐ Customer Number →

Place Customer
Number Bar Code
Label here

Type Customer Number here

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Arnold M. deGuzman De Guzman and Carpenter LLP				
Address	5276 Hollister Avenue, Suite 160				
Address					
City	Santa Barbara	State	CA	ZIP	93111
Country	USA				
Telephone	805-681-5078	Fax	805-681-5076		

RECEIVED

JAN 22 2003

Technology Center 2100

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- ☐ Applicant.
- ☐ Assignee of record of the entire interest.
Certificate under 37 CFR 3.73(b) is enclosed.
- ☒ Attorney or agent of record.
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name	Arnold M. de Guzman
Signature	
Date	January 13, 2003
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	
<input checked="" type="checkbox"/> *Total of 1 forms are submitted.	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

2133 #14
1-27-03
gm

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/827,451	
	Filing Date	April 6, 2001	
	First Named Inventor	Robert F. Terry	
	Group Art Unit	2133	
	Examiner Name	not yet known	
Total Number of Pages in This Submission	2	Attorney Docket Number	10007.000110

RECEIVED

JAN 22 2003

Technology Center 2100

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Change of Correspondence Address Application; Return receipt postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Arnold M. de Guzman, Reg. No. 39,955 De Guzman and Carpenter LLP
Signature	
Date	January 13, 2003

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: <u>January 13, 2003</u>			
Typed or printed name	Arnold M. deGuzman		
Signature		Date	Jan. 13, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.